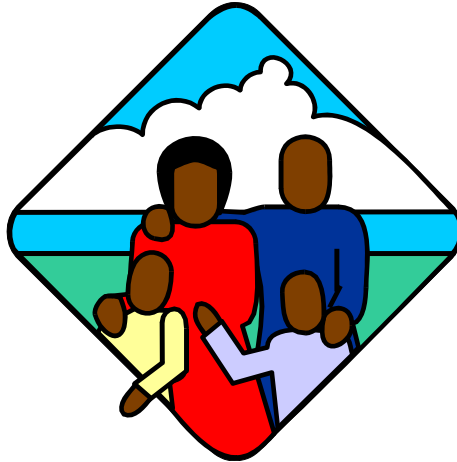


**ARIZONA DEPARTMENT OF ECONOMIC SECURITY  
DIVISION OF AGING AND ADULT SERVICES (DAAS)**



**Short Term Crisis Services (STCS)**

**POLICY MANUAL**

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## **SHORT TERM CRISIS SERVICES (STCS)**

### **PROGRAM OVERVIEW**

The Short-Term Crisis Services (STCS) program is a state program (A.R.S. 46-241) that provides temporary assistance to persons who have an emergent need that cannot be met immediately by their own income or resources. Services available through the STCS program include:

- emergency shelter
- eviction/foreclosure prevention
- move-in assistance
- utility assistance
- Special needs related to obtaining or maintaining employment.

Applications for assistance are taken by Community Action Program (CAP) agencies that are contracted to administer the STCS program through the Department of Economic Security, Division of Aging and Adult Services (DES-DAAS). Community agencies are responsible for obtaining documentation to determine eligibility, authorizing payments, and assisting the client in securing services that will alleviate the crisis.

**100. Purpose**

The purpose of the Short Term Crisis Service (STCS) program is to alleviate the crisis that prevents a household from meeting its basic needs.

**101 Format**

The manual is divided into major policy sections and subsections.

**102 Changes in Policy or Procedures**

- A. Each contract agency will be responsible for ensuring that the STCS Policy Manuals issued to individual staff members are maintained and updated.
- B. New and/or replacement pages for the STCS Policy Manual will be issued in the form of numbered Manual Transmittal Letters by DES-DAAS. The transmittal letters will contain instructions for updating the manual as well as a summary of the changes and the effective dates.

**103 Policy Questions and Clarifications**

All contract agency staff requesting clarification regarding procedural detail or policy interpretation will be elevated in the following order to:

- 1) The contracted agencies internal process;
- 2) The individuals designated at DES/DAAS are listed below and
- 3) All requests must be submitted in writing via FAX or Email to:

**DES/DAAS – Department of Aging and Adult Services**

**ATTN: POLICY DEVELOPMENT**

**FAX: 602-364-1756**

**OR**

**EMAIL TO:** [etapia@azdes.gov](mailto:etapia@azdes.gov) and [grobles@azdes.gov](mailto:grobles@azdes.gov)

## **200. APPLICATION PROCESS**

The application process for the STCS Program includes a face-to-face interview with contract agency staff, verification of eligibility information, and completion of the EN005 Application pages 1, 2 and 3 (ATTACHMENT 7).

**Home visit definition:** An individual does not have to be bedridden to be considered confined to his/her home. However, the condition of these patients should be such that there exists a normal inability to leave home and consequently, leaving the home would require a considerable and taxing effort. Any absence of the individual from the home attributable to the need to receive health care treatment, including regular absences for the purpose of participating in therapeutic, psychosocial or medical treatment in an adult day-care program that is licensed or certified by the State should not disqualify an individual from being considered confined to their home. Any other absence of an individual from the home shall not so disqualify an individual if the absence is infrequent or of relatively short duration. For the purpose of the preceding sentence, any absence for the purpose of attending a religious service shall be deemed to be an absence of infrequent or short duration.

## **201 EN005 Application**

### **.01 Application Form**

DES-DAAS currently recognizes the following application form:

The EN005 pages 1, 2 and 3 are the official application form for the STCS program.

The pink copy must be given to the client. The remainder of the application is retained by the agency. Applications for STCS are not forwarded to DES.

Application forms are provided to contract agencies by DES-DAAS. Applications may be obtained by completing the Application Order Form (ATTACHMENT 6), Mail or fax the completed form to DES-DAAS to the following:

**Department of Economic Security  
Division of Aging and Adult Services (DAAS)  
STCS Application Order Form  
Site Code 086Z  
P.O. Box 6123  
Phoenix, AZ 85005-6123  
FAX: 602-364-1756**

**.02 Right to Request Financial Assistance**

- A. All persons have the right to request financial assistance by following the procedures established by the local agency providing the services for the area in which they live.
- B. Interviewers are not to complete applications for their own relatives to the first cousin level. This includes step-and in-law relatives as well. Specifically, parents, siblings, spouses, aunts or uncles, they should be interviewed by another interviewer or the program manager. **All agency employee applications must be approved in writing by the contract agency director** or in the case of a subcontractor, the director of the subcontracted agency.
- C. **Future Income** - an agency cannot deny emergency financial assistance through the S TCS Program due to the household's lack of resources to meet future needs.

**.03 Completing the EN005 pages 1, 2 and 3 EXHIBIT II Application**

Contract agencies must ensure the EN005 pages 1, 2 and 3 is clear and legible and that no information is illegible from "white-out". The EN005 pages 1, 2 and 3 must contain the following information.

**EN005 – Page 1**

- A. Name, address, and if available, ten digit telephone number.
- B. Personal information, including:
  - 1. Social security number
  - 2. Gender
  - 3. Date of birth
  - 4. Citizenship status
  - 5. Disability
  - 6. Health Insurance
- C. Gross monthly countable income
- D. Description of crisis and crisis reason
- E. Employment history for all household members ages 18 and older (16 and older if not a full time student) for 30 days prior to and including date of application

**EN005 – Page 2**

- F. List applicant and all household members social security number or pseudo number assigned by the agency.
- G. List applicant and all household members names, last, first and middle initial.
- H. Mark gender for each household member, complete date of birth and using the codes on the back of page 3, complete the (6) last grade completed, (7) ethnic code and (8) citizenship status. Mark health insurance yes or no.



### **EN005 – Page 3**

- I. Payment information must include:
  - 1. Vendor name
  - 2. Billing name
  - 3. If Vendor is a landlord, must complete landlord section page 3 and include their FEI number.
  - 4. Service code
  - 5. Budget code
  - 6. Payment amount
- J. Signature of the applicant on the application must match the applicant's name throughout case file
- K. Case manager's signature must be legible and match the worker identification number on page one of the application.
- L. Eligibility must be determined within five (5) working days from the application date.

## **202 Standard Household Unit**

A Standard Household Unit consists of every household member who must be included in the eligibility determination for assistance. If the applicant or a household member is pregnant and in the third trimester of the pregnancy, the fetus is considered an eligible child and shall be listed as an individual in the household.

### **.01 Boarders**

Boarders are one or more persons living in the same house **paying rent to the owner of the home who also lives in the house** or one who lives and pays rent in a commercial boarding house. Income of the owner of the home or other boarders is not counted.

Household members related by blood or law to the owner of the home are not considered boarders, unless the applicant can supply documents that support a rental history.

- A. Susan and Jane live in the house that Susan owns. There is no blood or law relationship. Susan is renting a room to Jane and her two children. Jane and her two children are the boarders. Susan will not be included as a household member on the application and her income is not included.
- B. Jill and her minor child are boarders at a halfway house. Jill is not eligible because a halfway house is not considered permanent housing. Exception: If Jill and her minor child are moving from a half way house to permanent housing, they are eligible for move-in assistance.
- C. Jane and her new baby live with her Aunt Betty. Jane no longer receives child support and cannot pay her Aunt any rent money for the month of June. Because they are related, Jane is considered a roommate **not** a boarder. All family members are included on the application and Betty's income is included.

**Note:** An agency may contact DES to request approval for exceptions. Example: If Aunt Betty provides receipts documenting Jane's rental payment history or a contractual agreement indicating Jane's legal obligation to pay a specified rent amount, then Jane could be considered a boarder.

**.02    Roommates**

Roommates are one or more persons living in the same house **paying rent to a landlord outside of the home**. All income for roommates is counted.

- A. Linda and Donna pay rent to a landlord living outside the home and are considered roommates. Both Linda and Donna and their children and income will be included on the application (EN005 pages 1, 2 and 3 (ATTACHMENT 7)).
- B. Martin and Mary own and reside in their own home. Nephew Sam and his family live with them. They are considered roommates due to the blood relationship between Mary and Sam. All household members and their income will be included on the application (EN005 pages 1, 2 and 3 ATTACHMENT 7).

**Note:** If Martin and Mary provide receipts documenting Sam's rental payment history or a contractual agreement indicating Sam's legal obligation to pay a specified rent amount, then Sam and his family could be considered boarders.

**03.    Native Americans**

Registered Native Americans RESIDING ON their own reservation are not eligible for STCS financial assistance as the reservations receive separate funding to provide for tribal members. Native Americans RESIDING OFF their reservation may be determined eligible for STCS financial assistance.

### 300. Non-Financial Eligibility

### 301 Verification and Documentation

#### .01 Verification

Verification is the use of documents, systems information or contact with third parties to establish the accuracy of information provided by the applicant during the interview and indicated on the application form.

- A. The applicant has the primary responsibility for providing all required verification.
- B. The contract agency will offer assistance in obtaining the verification when necessary.
- C. Contract agency staff shall verify the U.S. Citizenship or Legal Resident status of at least one (1) qualifying child in the household. Copies of the documentation used for verification must be placed in the case file.
  - Documentation which may be used to verify Identity, U.S. Citizenship and Non-Citizen Legal Status are described in the attached policy labeled **EXHIBIT I INSTRUCTIONS FOR VERIFYING, U.S. CITIZENSHIP AND NON-CITIZEN LEGAL PERMANENT RESIDENT (LPR) STATUS (ATTACHMENT 1)**

**NOTE:** The applicant and the qualifying child are not eligible for STCS services for 12 month after benefits are received.

#### .02 Documentation

A record of all required documentation must be included in the case file. Documentation must support eligibility or ineligibility, and the services provided. Documentation must be in sufficient detail to permit a reviewer to analyze the accuracy of the eligibility determination.

- A. Documentation can be collected by hard copy (HC), collateral contact (CC), visual verification (VV), and client statement (CS).
  - Visual verification may only be used when providing a home visit.
- B. Additional documentation should be written by the case manager to support or clarify any information on the STCS application.
- C. A declaratory statement may be used as a last resort but **NOT** for verifying Citizenship or Legal Resident Status. A client statement may be taken to verify other information but only after all other resources have been exhausted. To be considered valid this statement must include:
  - a. Date the statement was made
  - b. Client's signature and
  - c. All information required for verification and documentation

**Mandatory Verification- The following eligibility criteria must be verified:**

- A. Identity of the Applicant; any document that establishes the applicant's identity will be accepted. Documents include, but are not limited to:
- Driver's license;
  - Work or school ID;
  - ID card from health benefits or other assistance or social service program;
  - Voter registration card;
  - Wage stubs;
  - Birth certificate;
  - Citizenship and/or immigration documents;
  - Family census card; or
  - Other reasonable written sources

**B. CITIZENSHIP**

U.S. Citizenship is established at birth when an individual is born in the U.S., its territories, or possessions. U.S. territories or possessions include any of the following. **EXHIBIT I INSTRUCTIONS FOR VERIFYING, U.S.**

**CITIZENSHIP AND NON-CITIZEN LEGAL PERMANENT RESIDENT (LPR) STATUS (ATTACHMENT 1).**

1. American Samoa
2. Guam
3. Northern Mariana Islands based on their date of birth
4. Panama Canal Zone based on their date of birth
5. Puerto Rico based on their date of birth
6. Swain Islands
7. U.S. Virgin Islands based on their date of birth

**C QUALIFIED LEGAL RESIDENT STATUS**

To be a qualified non-citizen with Legal Status at least one child in the household must meet one of the categories listed below and provide unexpired documentation. Each category is described on the attached policy labeled **ATTACHMENT 1- INSTRUCTIONS FOR VERIFYING, U.S. CITIZENSHIP AND NON-CITIZEN LEGAL PERMANENT RESIDENT (LPR) STATUS**

1. Lawful Permanent Resident (LPR)
2. Asylee
3. Refugee or American-Asian
4. Victim of Severe Trafficking
5. Non-citizen Paroled into the U.S.
6. Non-citizen whose deportation is withheld
7. Cuban or Haitian Entrant
8. Conditional Entrant
9. Abused or Battered non-citizen
10. Indefinite detainee
11. Continuously residing
12. Disabled non-citizen
13. Military connection

➤ **ATTACHMENT 1- INSTRUCTIONS FOR VERIFYING, U.S. CITIZENSHIP AND NON-CITIZEN LEGAL PERMANENT RESIDENT (LPR) STATUS**  
applies to both Citizenship and Non-Citizen with Legal Resident status:

1. An eligible applicant must execute a sworn affidavit stating that the documentation provided as listed in Exhibit I Instructions for Verifying Citizenship and Non-Citizen Legal Permanent Resident (LPR) Status during the verification process is true.

**NOTE:** Caseworker should fill out the affidavit and include only the document used to verify citizenship status and have the client sign the affidavit once the form is completed by the caseworker.

2. Contractors who determine eligibility for these programs will be required to ensure that a sworn affidavit is obtained in a way that does not delay the eligibility determination process, or add cost to the process for the applicant.
3. Eligible applicants are exempt from providing an affidavit only if they are 60 years of age or older, if they are Tribal Members, or if they are disabled or have an incapacity of the body or mind which makes them unable to supply such affirmation.

**NOTE:** *A STCS benefit payment shall not be pro-rated based upon existence of undocumented immigrants in the household.*

- D. An eligible applicant must execute a sworn affidavit (sample attached) stating that the documentation provided during the verification process is/are true.
- E. **Residency and residential Address;**  
Applicant must be a resident of Arizona. Services cannot be authorized or delivered to an applicant who is traveling through the state or living in Arizona for a temporary reason. Assistance may be provided to homeless households if they are requesting assistance to establish utility services. Client may provide, lease agreement, utility bills (in clients name), etc.
- F. Age or student status for any household member 16 and above for income;
- G. Gross Non-Exempt Income of all household members
- H. Termination of employment for any household member
- I. Social Security Number

### 303 **CRISIS AND CRISIS REASON**

To be eligible for STCS assistance, the household must be experiencing or expects to experience homelessness, (*requires an eviction or foreclosure notice*), or an interruption of cooling or heating, (*requires a past due bill or shut off notice*). The emergent need, or crisis, must have been caused by one or more reasons as defined in this section. There is no time limit for which a crisis reason must occur. For example, a client who is facing eviction today may have experienced a loss of income due to a job lay-off four months ago. **It is the case manager's responsibility to determine the legitimacy of the crisis reason and its relationship to the client's current need for emergency services.** The crisis reason must be supported with the necessary documentation and verification. Eligible crisis reasons are as follows:

**01. A separation of the family that resulted from domestic violence.  
(Cannot return home to access resources of partner)**

This crisis reason can be used when a person is a victim of domestic violence and is no longer living with the abuser. If the person is living with the abuser she/he must be referred to the closest domestic violence shelter facility.

**02. Loss of income:** Includes, but is not limited to:

- Abandonment by primary wage earner. (There is no time frame associated with abandonment. The agency shall make the determination of abandonment)
- Death of a wage earner within the home
- Divorce
- Incarceration
- Incapacitated
- Reduction of workforce
- Loss of employment due to lay off
- Loss of employment due to involuntary termination (**regardless of reason**)
- Loss of employment (see section 601, Voluntary Quit/Reduction)
- Theft of income documented by a police report
- Serious illness/injury documented by a physician's statement (a serious illness which has caused the household to lose income)

**03. Unforeseen circumstances that increased expenditures making it difficult to meet the following month's budgeted expenditures.**

- Medical bills
- Car repairs
- Natural/manmade disaster
- Death in immediate family (natural, adoptive, or step: mother, father, brother, sister, or grandparent.)
- Expenses associated with parental responsibility (i.e.: legal obligations, legal or physical custody of biological and non-biological children)

**NOTE: Call DES-DAAS STCS Program Specialists for approval on any additional unforeseen circumstances not listed.**

**04. A condition that endangers the health or safety of the household.**

The Fire Department, Police Department, Department of Health, Medical Practitioner, Pest Control, etc may verify conditions. The caseworker may verify by visual verification for a child age 2 and under, and elderly or disabled individuals in the household. Health and Safety conditions include but are not limited to:

- Lead poisoning
- Condemned property
- Identification of asbestos in home
- Infestation by rodents/vermin
- Medical condition with physician's statement (or documentation that the client receives SSI or SSDI)

**05. Special needs necessary to secure or maintain employment.**

Special needs include the following:

- Eye glasses
- Car repair
- Dental

**NOTE: Call DES-DAAS STCS Program Manager for approval on any additional special needs not listed.**

**400. Eligibility Categories for STCS funding**

**STCS is targeted specifically to households with children under the age of 18. There must be one or more children in the household who meet US citizenship or qualified non-citizenship status in order to provide the applicant with STCS.**

**A. Specified Relative**

To be eligible, a qualifying dependent child must be living with and in the care and physical custody of a specified relative OR legal guardian. Specified relatives are defined as follows:

1. Parents. A natural or adoptive mother or father.
2. Non-parent relatives to include:
  - a. A stepmother, stepfather, and any of the following relatives related either by blood or by adoption: brother, sister, uncle, aunt, first cousin, nephew, niece, grandmother, grandfather, persons of preceding generations as denoted by prefixes grand, great, first cousins once-removed and great-great-great-grandparents.
  - b. Spouses of any individual named above, even when death or divorce has terminated the marriage.

3. Legal Guardianship and Legal Custody

Legal Guardianship and Legal Custody may substitute for the specified relative requirement when the guardian has legal custody of the child but is unrelated by blood or marriage. Physical custody is not necessarily the same as legal guardianship. A foster child is not a qualifying dependent child as the State is the legal guardian.

4. The eligible child must be without income and resources to meet the identified crisis reason.

**NOTE: Households who have received assistance from the TANF cash diversion option are not eligible for STCS benefits for a period of 120 days following receipt of diversion assistance.**

**401** **Time Limits**

STCS can be authorized only once in a twelve consecutive month period, which begins on the eligibility date determined by the contract agency. Clients must meet both financial and non-financial eligibility criteria



**500. Payment Allowances for Short Term Crisis Services Financial Assistance**

All payments must be made and reported to the actual dollars and cents.

**A. TEMPORARY SHELTER: (i.e.: hotel/motel)**

- Maximum amount allowed: \$300, not to exceed 7 consecutive days
- Maximum request for service: 1 time in 12 months
- General Rule:  
Temporary shelter should be used when permanent shelter is not available. The provider must be attempting to locate permanent shelter.

**B. HOUSING ASSISTANCE**

- Maximum amount allowed: \$1500
- Maximum request for service: 1 time in 12 months
- General Rule:
- Housing assistance includes move-in assistance and eviction prevention for rental or mortgage

**C. UTILITY ASSISTANCE**

- Maximum amount allowed: \$500
- Maximum request for service: 1 time in 12 months
- General Rule:  
The payment cannot exceed the amount of the bill and can be authorized for heating, cooling, water and sewer services. May be used to pay sanitation only if inclusive in the household's utility bill.  
Bill must be past due. A shut-off notice is not required. Payment can also include deposits.

**D. SPECIAL NEEDS**

- Maximum amount allowed: \$300
- Maximum request for service 1 time in 12 months
- General Rule:  
Only with specific TANF funding, (See Budget code listing).  
Needed to secure or maintain employment. Services not related to employment must be approved by DES.

**NOTE:** *An agency shall not require an applicant to pay a portion of their rent, mortgage or utility obligation as a condition for receiving emergency financial assistance through the STCS program.*

**600. Financial Eligibility for the Short Term Crisis Services (STCS) Program effective; July 1, 2011 to June 30, 2012**

**601 Voluntary Quit/Reduction**

Any household member age 18 or older (16 or older if not a full time student) must not have terminated their income in the past 30 days prior to and including the application date unless good cause for termination is provided

**.01 Applicability**

- A. The Voluntary Quit or Reduction in Work Effort disqualification applies to the entire household.
- B. The household is disqualified when a household member quits without good cause in the following situations:
  - 1. Quits a job and was employed 20 hours or more per week or received earnings equal to the minimum wage multiplied by 20 hours at the time of the job quit; AND
  - 2. The job quit occurred within 30 days prior to the date of application; OR
  - 3. Reduces their work effort within 30 days prior to the date of application. A reduction in work effort occurs when the household member was working 30 hours or more per week and, voluntarily without good cause, reduces his/her hours to less than 30 hours per week.

**.02 Voluntary Quit/Reduction Good Cause Circumstances**

The following examples can be considered “good cause” for Voluntary Quit/Reduction. This list is not meant to be all-inclusive. The staff of the Contract Agency must make a final determination on the validity of the Voluntary Quit/Reduction claim.

- A. Circumstances beyond the household member’s control, such as illness of another household member requiring the presence of the member, unavailability of transportation, unanticipated emergency, unsuitability of work, or the lack of adequate child care for individuals responsible for the care of children under the age of 12;
- B. Inability to write or speak English;
- C. Lack of day care for an incapacitated child or adult living in the same household;
- D. Serious illness or incapacity of the household member;
- E. Work demands or conditions that render continued employment unreasonable, such as working without being paid on schedule;
- F. Resignation by a household member under 60 who is recognized by the employer as retired;
- G. Employment that is unsuitable. Employment will be considered unsuitable when the following conditions apply:
  - (1) The job is on a piece-rate basis, and the average hourly rate that the employee can reasonably be expected to earn is less than the minimum required wage.

- (2) As a condition of employment, the employee is required to join, resign from, or refrain from joining any legitimate labor organization.
- H. The household member can demonstrate or it can be determined that any of the following is true:
  - (1) The individual is physically or mentally incapable of performing the assigned tasks of the job. Documented medical evidence or reliable verification from other sources is required.
  - (2) The degree of risk to health and safety is unreasonable.
  - (3) Commuting time exceed two hours each way. This does not include time to transport a child to and from a child care facility.
  - (4) Employment is not considered suitable when the distance prohibits walking, and neither public nor private transportation is available.
- I. Employer discrimination based on age, race, sex, handicap, religious beliefs, national origin, political beliefs, or sexual orientation;
- J. Leaving a job in connection with patterns of employment in which workers frequently move from one employer to another, i.e., migrant farm workers or construction work;
- K. Resigning from a job or reducing hours at the demand of the employer;
- L. Quitting a job to accept new employment of similar hours and salary. Through no fault of the participant, the new job either fails to materialize or results in a layoff;
- M. The individual was laid off but has a definite return date; **(Not Voluntary)**
- N. Acceptance of employment would have resulted in the family's experiencing a net loss of income;
- O. Reduction of workforce. **(Not Voluntary)**

**NOTE: The case file must be thoroughly documented regarding good cause circumstances.**

## 602 Income

This section describes various kinds of income used to determine eligibility. These policies and procedures are applicable to all households who apply for services from the Short Term Crisis Services (STCS).

### .01 **Countable Incomes**

EARNED and/or UNEARNED income will be considered in determining eligibility for services. The gross amount of income prior to deductions will be counted unless otherwise specified.

- A. Income will be counted as received at the time it is made available to the household. A check is considered **received** when it is added to the deposited account, put in the hands of the client, or made available to the client.
- B. **Example:**  
Friday is a regularly scheduled payday. Client requests paycheck that is available on Friday, March 31, 2000 be mailed due to illness. The check was received in April. The check will be counted as **received** on March 31<sup>st</sup>.
- C. Regular monthly income deposited directly into a financial institution (e.g. SSA, SSI, VA, etc.) will be considered countable income in **the month for which it was intended**. Count the income in the month it is intended, even when it was actually received in the prior month.
- D. **Example:**  
SSA deposited April's social security check on March 31, 2000 because April 1<sup>st</sup> (normal day of deposit) was a Saturday. The **month for which it is intended** is April. Count the social security check received April 1st.
- E. **Non Recurring lump sum payments are counted as both a resource and income.** When a portion of the lump sum is intended for the current month, only that portion is countable income. The balance would be counted as a resource. Sources of lump sum payments include but are not limited to: CA, GA, SSA, SSI, VA, and UI.

#### **Example:**

Client receives a **non-recurring lump sum payment** from SSA in the amount of \$1,800 in June. Client was awarded \$600 per month. The \$1,800 is for the months of April, May, and June. Count \$600 as income for June. The remaining \$1,200 is counted as a resource because it is back payments for the prior months of April and May.

### .02 **Individuals Who's Income Must Be Counted**

- A. Any income of a household member age 18 and older will be counted, including ineligible household members. Income for all persons ages 16 and 17, **who do not attend school full time**, will be counted.

**.03 Individuals Who's Income Will Not Be Counted**

- A. Any and all earned and unearned income for persons ages 16 and 17 who attend school full time is not counted.
- B. When domestic violence occurs, the income and resources of the abuser are not counted as long as domestic violence is the crisis reason, and the abuser is no longer in the household.(see section 304.01)
- C. When domestic violence occurs, the income and resources of the applicant are not counted as long as the applicant does not have access to his/her income and resources, and the abuser is no longer in the household

**603 Earned Income**

Earned income is defined as either cash, or in-kind income received as compensation for wages, salaries, commissions, or profit through employment or self-employment.

**.01 Types of Earned Income** Earned income includes but is not limited to:

- A. ARIZONA TRAINING PROGRAM (ATP) - Salaries to handicapped persons working in a sheltered workshop situation are counted. Verbal or written verification may be obtained from ATP.
- B. BABY-SITTING OR CHILDCARE INCOME - Earnings from baby-sitting are counted as self-employment income. Verbal or written verification may be obtained from DES or the person paying for the care.
- C. CAN OR BOTTLE SALES OR OTHER USABLE DISREGARDS - Income from these sales is counted as self-employment income. Client should have receipts for such sales. If receipts are not available, a signed and dated client statement would be acceptable.
- D. CONTRACT INCOME – Income received by individuals who are employed under a contract that states a specific length of time and a specific income amount to be paid during that time.
- F. HOUSEKEEPER OR HOME HEALTH AIDES - Income earned as a housekeeper or home health aide is countable. Verbal or written verification may be obtained from the employer. Income is only counted once, if living in the household and paid by the applicant.
- G. IN-KIND EARNED INCOME - Work performed by a client in exchange for room, board, or other needs is earned in-kind income. The employer will establish the monetary value of the service. A collateral contact or a signed and dated statement from the employer, or client can verify in-kind income. The employer may be, but is not limited to:

1. A landlord who is providing rent, or portions of the rent or utilities in exchange for work.
  2. A storeowner who gives goods, such as groceries, clothes, or furniture in exchange for work.
  3. An individual who receives a car, tools, trailer, building material, gasoline, etc. in exchange for work.
- H. JURY PAY - Counted as earned income. Check stubs should be available to verify income.
- I. MILITARY INCOME – Wages received while in the military are countable. This includes: base pay (BP), Proficiency pay (PRO), rations (separate/leave), basic allowance for housing (BAQ), basic allowances for subsistence (BAS), and variable housing allowance (VHA) when considered an entitlement. Use the leave and earnings statement, when available, to verify the amount of earned income issued.
- J. RENTAL INCOME – Any monies received from rental of property, including boarders, less expenses, are counted as earned income if work is involved.
1. Work includes, but is not limited to, managing rental property requiring maintenance, collection of rent, or accounting functions. There is no time requirement for number of hours worked.
  2. If a person's income from rental of property does not require work, rent is considered unearned income.
- K. SELF-EMPLOYMENT INCOME AND EXPENSES - Self-employment includes but is not limited to, businesses such as grocers, craftsmen, taking in boarders, ranching, farming, swap meet sales, odd jobs, baby-sitting, can and bottle collection, janitorial, guide for hunting or fishing, or any wholesale or retail sales.

Clients are not considered self-employed if they work for a business or another person on a commission basis, unless the client reports and pays his/her own withholding taxes for state, federal and FICA. Acceptable verification for self-employment is:

1. IRS Form 1099
2. Ledger statement
3. Client statement

When calculating self-employment income, the client may deduct any business expenses. Gross incomes minus business expenses equals' countable income.

- L. SELF-EMPLOYMENT INCOME AND EXPENSES - Self-employment includes but is not limited to, businesses such as grocers, craftsmen, taking in boarders, ranching, farming, swap meet sales, odd jobs, baby-sitting, can and bottle collection, janitorial, guide for hunting or fishing, or any wholesale or retail sales.
- M. VOCATIONAL REHABILITATION (VR) – Wages from VR sponsored on-the-job training (OJT) are countable.

- N. WAGES – Gross earnings from employment, prior to any deductions, garnishments, allowances, or adjustments. Special benefits or deductions connected with employment earnings are counted as follows:
1. Advances, bonuses and commissions must be counted as earned income in the month received.
  2. When tips are shown on the pay-stub and the household claims a lesser amount but has no record of actual tips received, count the amount on the pay-stub.
  3. When tips are not shown on the pay-stub, obtain the individuals' written tip record. When not available, obtain a written statement from the household or contact the employer.
- O. WORKFORCE INVESTMENT ACT (WIA) – Earnings from employment through WIA will be counted for persons age 18 and over.
- P. WORK STUDY - Earnings received from the following: Work-study programs, when the funds do not come under Title IV of the Higher Education Act; Veterans Administration work-study program.

.02 Verification of Earned Income

Gross earned income must be verified prior to initial approval. All gross earned income received by the household members ages 18 years and older (16 unless a full time student) is counted in determining the total income. Contract agency staff are responsible for obtaining accurate gross amounts from the client or employer.

Acceptable verification includes but is not limited to:

1. Paycheck stubs(s);
2. Copy of check, when gross earnings are listed;  
Employer's statement that is signed and dated. (When employer verification would jeopardize the applicant's job, other means of verification must be pursued.)
4. The employer's statement must include the following:  
Name, address and telephone number of employer,  
Frequency of receipt,  
Gross amount of income,  
Day of the week pay is received.
5. Letter from the agency providing government sponsored training;
6. Assistance payment records;
7. Award letter;
8. Bank records;
9. Court records;
10. DCSE printouts;
11. Divorce or separation papers or contact with the Clerk of the Court;

12. The current check, when it reflects gross income. Federal government checks are not to be photo copied; Signed statement from agency or payer providing income
14. Client's statement, WHEN NO OTHER VERIFICATION CAN BE OBTAINED. All other possible verification sources must be exhausted before accepting client statement. Document all attempts to verify and why the client's statement is being allowed.

**B. Verification of Terminated Income**

1. When job termination is reported in the prior 30 days to the date of the application, verify the following:
  - The date of termination;
  - Gross income received in the prior 30 days;
  - The last payday and the gross amount paid.

**604 Unearned Income**

Income, which was not received as a result of the performance of a service, or earned from sources other than employment, self-employment or in-kind income.

- .01 Types of Unearned Income: Countable unearned income includes but is not limited to:
  - A. ALIMONY OR SPOUSAL MAINTENANCE - A court-ordered support amount, which a legally divorced or separated person pays to the spouse, must be counted. Verbal or written verification may be obtained from the office of the Clerk of the Court or Division of Child Support Enforcement.
  - B. Assistance (CA) from this state, as well as, other states must be counted.
  - C. BUREAU OF INDIAN AFFAIRS (BIA)
    1. BIA-General Assistance payments are public assistance and treated as any other assistance payments.
    2. Clothing allowances available to the individual, whether in cash or a voucher made out to the individual must be counted.
    3. Tribal Work Experience Program (TWEPP) or Tribal Assistance Project Program (TAPP). Exclude any portion of the amount, which is an incentive payment.
  - D. CHILD SUPPORT - Any payment received directly by the household from an absent parent or paid through the Division of Child Support Enforcement or Clerk of the Court. All child support income will be considered unearned income.
  - E. COMMISSIONS - Commissions received from a terminated source of employment are counted as unearned income.
  - F. CONTRIBUTIONS AND COMPLIMENTARY ASSISTANCE - Cash contributions must be counted as unearned income, if not considered as gifts or child support.
  - G. INDUSTRIAL COMPENSATION - The amount of the compensation, after attorney's fees are deducted, is unearned income. The Industrial Claim award letter will verify amount being paid but will not verify the attorney's fees.



- H. INDIAN GAMBLING INDUSTRY - Per capita disbursements are considered income in the month received. Any amount remaining in a following month will be counted as a resource.
- I. INSURANCE
  - 1. Insurance payments made directly to the insured must be considered income IF the money is not used to replace or repair insured items, such as car, roof repair, or medical bills.
  - 2. Insurance benefits, which are used for or are intended to meet basic daily needs, are counted as unearned income.
- J. INTEREST, DIVIDENDS, AND ROYALTIES - Any interest, dividend, or royalty payments, exceeding \$50 in the 30 days prior to and including date of application made directly to the individual, are counted as unearned income. Funds left on deposit or converted into additional securities are a resource.
- K. LEGAL SETTLEMENTS - Legal settlements, less attorney fees and medical bills paid by the attorney out of the settlement, are unearned income in the month received.
- L. MORTGAGES AND SALES CONTRACTS - Payments received from mortgages or sales contracts are counted. Includes payment received from a reverse mortgage.
- M. LUMP SUM PAYMENT – Any form of income received in a lump sum payment, including but not limited to:
  - 1. Inheritance;
  - 2. Winnings from lotteries, bingo, or any other form of gambling;
  - 3. Insurance settlements including any amount withheld as a lawyer's fee;
  - 4. Property Tax Credit;
  - 5. Rebates/Credits;
  - 6. Refund Deposit;
  - 7. Severance Pay.
- N. RENTAL INCOME - If the property owner does not perform any services in order to receive the income, it is unearned income.
- O. RETIREMENT INCOME - The payments from retirement funds, pensions, and annuities must be considered unearned income.
- P. SOCIAL SECURITY ADMINISTRATION BENEFITS\* - SSA benefits (sometimes referred to as RSDI-Retirement, Survivors, and Disability Insurance) are granted to eligible wage earners and/or their dependents or survivors and are counted as unearned income.
- Q. SUPPLEMENTAL SECURITY INCOME (SSI) - Monthly cash payments made under the authority of Title XVI of the Social Security Act, as amended, to the aged, blind, and disabled (A Federally financed public assistance program). The recipient need not have contributed to the Social Security Fund to be eligible for SSI benefits.
- R. STRIKE PAY - from unions to striking employees is not wages and must be considered unearned income. If there is no check stub, verification can be obtained by calling the Union.
- S. UNEMPLOYMENT INSURANCE (UI) - Considered unearned income in the month received. The amount of income can be verified by a check stub or contacting the local UI office.

- T. VETERANS ADMINISTRATION BENEFITS (VA) - Retirement, Survivors, Disability, and Educational Benefits are paid to veterans and their dependents or survivors. Only the amount of the benefit, which is actually received by the person whose income must be included, will be counted.

**.02 Verification of Unearned Income**

- A. Gross income must be verified before approval. Acceptable verification includes but is not limited to:
1. Assistance payment records;
  2. Award letter;
  3. Bank records;
  4. Court records;
  5. Division of Child Support Enforcement (DCSE) print-outs;
  6. Divorce or separation papers or contact with the Clerk of the Court;
  7. The current check when it reflects gross income. Federal government checks are not to be photocopied;
  8. Signed statement from the agency or payer providing the income;
  9. Client's statement **WHEN NO OTHER VERIFICATION CAN BE OBTAINED**. All other possible verification sources must be exhausted before accepting a client statement. Caseworker must document all attempts to verify why the client's statement is being allowed.

**605 Excluded Income**

Only the income discussed in this section will be excluded.

- A. Insurance payments designated to repay a specific bill, debt, or estimate, which cannot be used for other needs, is not countable;
- B. WIC - Payments or benefits to persons participating in the WIC program (Special Supplemental Food Program for Women, Infants, and Children) must be disregarded;
- C. Retirement, pension, and annuity accounts are not countable as long as the money **cannot** be withdrawn **without penalty**;
- D. Bureau of Indian Affairs (BIA) work-study program. This includes monies provided for educational and living expenses;
- E. Work study programs funded under Title IV of the Higher Education Act;
- F. Any portion of an education grant or scholarship used for books & supplies, tuition or fees;
- G. Earned income of a child 16 and 17 years of age who is a full time student;
- H. Earned income of a child under 16 years of age;
- I. Cash gifts of \$50.00 or less per month per household member;
- J. Non-cash benefits provided on behalf of a household member but not paid directly in the name of the household member, including but not limited to vouchers for food, clothing, or housing;
- K. Loans that need to be repaid;
- L. Money that a household member receives and uses for the care and maintenance of a person who is not a household member;

- M. Payments/vouchers received by the household from the State for the health/well-being of a foster child residing in the household.
- N. Stipends from senior companion programs –VISTA, Title II, Title V;
- O. Earned Income Tax Credit;
- P. Income Tax Refund;
- Q. Reimbursements, e.g.; mileage, gas, lodging, and meals;
- R. Agent Orange Payments;
- S. Ameri-Corps Network Program payments for living allowances, earnings, and in-kind aid. The Ameri-Corps Network Program includes but is not limited to:
  - 1. Arizona Conservation Corp,
  - 2. Arizona Council of Centers for Children and Adolescents (ACCCA),
  - 3. Border Volunteer Corps (BVC),  
Mesa Ameri-Corps Community Services Partnership,  
Rural Health Office, University of Arizona,  
Youth in Action, Learn and Serve (NAU),  
Child Care Food Program payments,
- T. Disaster or emergency assistance provided by the Federal Disaster Relief Act or comparable assistance provided by States, local governments and disaster assistance organizations;
- U. Housing and Urban Development (HUD) – Some individuals residing in HUD housing are granted benefits either in the form of credits against their rent or as cash allowances. The cash allowance must be used for the purpose intended, (rental or utility obligation).
- V. Income received directly from the U.S. Census Bureau by participants who are temporarily working for the U.S. Census is not countable.
- W. Individual Delopment Account (IDA) Deposits-** 50% of earned income, up to a maximum of \$100, deposited into an “Individual Development Account (IDA) per month is not countable.
- X. JobStart Income-** Earnings received from participating in the JobStart program are not countable.
- Y. Training Related Expense (TRE) Income-** Reimbursements for training Related Expenses (TRE) are not countable. These include, but not limited to, the following:
  - 1. Fair labor Standards Act (FLSA) supplements issued to Jobs participants.
  - 2. Unpaid Work Experience (UWE) supplements issued to Jobs participants.
- Z. Other types of income not countable:**
  - A. Earnings from Title I and II of the DVSA are not countable.
  - B. Earnings received from participation in college work study programs funded by either Title IV of the Higher Education Act or Title XIII of the Indian Higher Education Program is not countable.
  - C. Workforce Investment Act (WIA) program earnings are not countable. This includes earnings received from On-the-Job Training (OJT).

## **606 Income Source**

The income eligibility determination will be completed prior to approving financial assistance.

### **.01 Documentation**

The case file must be clearly documented. Documentation must include, but is not limited to:

1. Discussion with individual;
2. Verification received from the income source:
  - a. Hourly wage
  - b. Hours worked
  - c. Pay period end date
  - d. Actual pay dates
  - e. Frequency of pay;
3. Extra income – such as, bonuses, tips, commissions, overtime;
4. Explanation of how self-employment income was determined;
5. Date, name, phone number and information about the collateral contacts;
6. Identify the time frame by dates for the 30-day period prior to and including the date of application, i.e., from (month/date) to (application date);
7. Using the frequency and the day of the week paid from a calendar; determine the number of pay dates in the thirty-day period.

### **.02 Calculating Income**

- A. Identification of the 30-day period prior to and including the date of application: i.e., from (month/date) to (application date);
- B. The number of pay dates in the thirty-day period; determine frequency of pay date and the day of the week paid.
- C. Write the received dates and the gross income.
- D. Total this and any other income for the household to calculate the gross income. This process is used to determine if the household is eligible under the required poverty guidelines for STCS (see page 24).

## **07 Future Income**

An agency cannot deny assistance through the **Short Term Crisis Services (STCS)** programs due to the household's lack of resources to meet future needs.

## 700. Income Limits – Poverty Guidelines

A household's total gross countable income shall not exceed 125% of the Federal Poverty Guidelines or 150% if there is a disabled and/or elderly person (60 years of age and older) in the household.

### **FEDERAL POVERTY INCOME GUIDELINES EFFECTIVE October 1, 2011 30 DAYS INCOME**

<b>FAMILY SIZE</b>	<b>125% OF POVERTY</b>	<b>150% OF POVERTY</b>
1	\$1,135	\$1,362
2	\$1,533	\$1,839
3	\$1,930	\$2,316
4	\$2,329	\$2,795
5	\$2,726	\$3,272
6	\$3,124	\$3,749
7	\$3,523	\$4,227
8	\$3,920	\$4,704
9	\$4,318	\$5,181
10	\$4,716	\$5,660
For Each Additional Household Member Add:	\$398	\$477

Figures derived from information dated January 11, 2011 Federal Register/  
Department of Health and Human Services, Office of the Secretary.  
(<http://aspe.hhs.gov/poverty>)

## **800. Decision Notices**

### **801 Approval Notices**

When the decision is to approve assistance for **Short Term Crisis Services (STCS)**, the agency approval notice or EN005 application completed approval page is given to the applicant. No further action will be required. If the client refuses the copy of the completed approval page, Case Manager must document this in the file.

### **802 Denial Notices**

When the decision is to deny or reduce assistance, the denial reason must be stated on the denial letter, or on the EN005 application, which is given to the applicant.

The applicant has the right to appeal this decision. Instructions for initiating the appeal process are listed below in Section 700, Grievance Hearing.

The applicant is handed or mailed a hard copy of the denial notice within five (5) working days of application date.

## **900 PAYMENT PROCESS**

The contracted agencies will make direct payments to vendors, and will receive reimbursement through the DES-DAAS contract invoice process.

## **1000. GRIEVANCE HEARING**

A grievance hearing is a process through which any individual may have a decision reviewed by an impartial third party.

A hearing may be conducted in an informal manner and without adherence to the rules of evidence required in judicial proceedings. Neither the manner of conducting the hearing or the failure to adhere to the rules of evidence required in judicial proceedings shall be grounds for reversing any administrative decision or order, providing the evidence supporting such decision or order is substantial, reliable, and probative.

### **1001 Right to File**

#### **.01 Reasons for Requesting a Grievance Hearing**

An opportunity for a grievance hearing shall be granted to any appellant who requests a hearing because his or her application for financial assistance was denied, terminated or incurred a benefit reduction.

#### **.02 Time Limits**

The appellant must submit a written request to the Contract Agency within ten (10) working days of the date on the EN005 application (EN005) denial page, or date of post-marked letter denying eligibility or affecting assistance. The request must be signed, dated, and contain the reason for requesting the hearing.

#### **.03 Notification Requirements**

During the interview process, the appellant must be informed of the right to request a grievance hearing, the procedure for requesting it, and the right to be represented by anyone of his/her choice.

## **1002 Contract Agency's Responsibilities**

The Contract Agency will provide the applicant with a copy of the ENOO5 application. The Contract Agency is also responsible for the following hearing related activities:

- A. Upon written or verbal request, provide the appellant with the phone number and address of any legal service available.
- B. Upon written or verbal request, provide the appellant with materials needed to prepare for the hearing, including copies of pertinent documents in his/her case file.
- C. The fair hearing notice shall be given to the appellant at least twenty (20) calendar days prior to the date set for the hearing and include: date, time, address, and a statement of the issues involved.
- D. Determine whether a bilingual interpreter or other alternative form of communication is needed.
- E. The Contract Agency shall render a written decision to the appellant no later than twenty (20) calendar days from the date of the grievance hearing.
- F. Appellant must be advised of their right to appeal the decision and process by which to do so.

## **1003 Appeals**

### **.01 Appellant's Appeal of Contract Agency's Decision**

- A. In the event the appellant wishes to appeal the decision of the Contract Agency, the Program Manager at the Department of Economic Security, Division of Aging and Adult Services level will be responsible for conducting the appeal hearing.
- B. The appellant must submit a written request to DES-DAAS within ten (10) working days of the post-mark date of the Contract Agency's grievance decision. The request must be signed, dated, and contain the reason for requesting the hearing. The request must be submitted to:

**DEPARTMENT OF ECONOMIC SECURITY - Site Code 086Z**  
**Division of Aging and Adult Services**  
**COMMUNITY ACTION PROGRAMS (CAP) Manager**  
**P.O. Box 6123**  
**Phoenix, AZ 85005-6123**

All documents given to the public must include a reasonable accommodation statement.

### **.02 Contract Agency Responsibilities to Division of Aging and Adult Services**

The Contract Agency is responsible for providing the following information to DES-DAAS within ten (10) working days from the request:

- A. A grievance packet that contains the application, verification documents which justify the agency action taken, case notes, print outs and all other information relevant to the issue, and a copy of the denial notice given to applicant.

- B. A brief summary of the circumstances supporting the Contract Agency's determination which is at issue including copies of all pertinent documentation.
- C. The date the hearing was conducted.

**.03 Division of Aging and Adult Services Responsibilities**

DES-DAAS staff is responsible for the following hearing related activities:

- A. Upon written or verbal request, provide the appellant with the phone number and address of any legal service available.
- B. Upon written or verbal request, provide the appellant with materials needed to prepare for the hearing, including copies of pertinent documents in his/her case file.
- C. The fair hearing notice shall be given to the appellant at least twenty (20) calendar days prior to the date set for the hearing and include: date, time, address and a statement of the issues involved.
- D. Determine whether a bilingual interpreter or other alternative form of communication is needed.
- E. Program Manager shall render a written decision to the appellant and Contract Agency no later than twenty (20) calendar days from the date of the grievance hearing.

**.04 Appellant's Appeal of Community Division of Aging and Adult Services Decision**

- A. If the appellant wishes to appeal the decision of the Program Manager, Division of Aging and Adult Services (DES-DAAS), the Executive Staff Assistant will be responsible for conducting the appeal hearing and making the final determination.
- B. The appellant must submit a written request to the DES-DAAS Executive Staff Assistant within (10) ten working days of the post-mark date of the Program Manager's letter denying eligibility or reducing assistance. The request must be signed, dated, and contain the reason for requesting the hearing. The request must be submitted to:

**DEPARTMENT OF ECONOMIC SECURITY  
Division of Aging and Adult Services  
Community Action Programs Unit  
Site Code 086Z  
Executive Staff Assistant  
P.O. Box 6123  
Phoenix, AZ 85005-6123**

**.05 Contract Agency's Appeal Rights**

- A. If the Contract Agency wishes to appeal the decision of the Program Manager, Division of Aging and Adult Services (DAAS), the Executive Staff Assistant will be responsible for conducting the appeal hearing and making the final determination.



- B. The Contract Agency must submit a written request to the Executive Staff Assistant at the Division of Aging and Adult Services (DAAS) within (10) ten working days of the post-mark date of the Program Manager's letter of the appellant's appeal decision. The request must be signed, dated, and contain the reason for requesting the hearing. The request must be submitted to:

**DEPARTMENT OF ECONOMIC SECURITY**  
**Division of Aging and Adult Services**  
**Community Action Programs Unit**  
**Site Code 086Z**  
**Executive Staff Assistant**  
**P.O. Box 6123**  
**Phoenix, AZ 85005-6123**

**.06 Arizona Department of Economic Security**

The Executive Staff Assistant is responsible for the following appeal hearing activities:

- A. Upon written or verbal request, provide the appellant with the phone number and address of any legal service available.
- B. Upon written or verbal request, provide the appellant with materials needed to prepare for the hearing, including copies of pertinent documents in his/her case file.
- C. The fair hearing notice shall be given to the appellant at least twenty (20) calendar days prior to the date set for the hearing and include: date, time, address, and a statement of issues involved.
- D. Determine whether a bilingual interpreter or other alternative form of communication is needed.
- E. The Executive Staff Assistant shall render a written decision to the appellant, Contract Agency, and Contract Manager no later than twenty (20) working days from the date of the grievance hearing.

## **2000. Operating Principles**

### **2001 Nondiscrimination**

#### **.01 Requirements**

- A. In compliance with Title VI of the Civil Rights Act of 1964 and Executive Order 12250, no individual in Arizona shall be excluded from participation in, denied benefits or subjected to discrimination under any program or activity receiving Federal funds, because of:
  - 1. Race;
  - 2. Color;
  - 3. National origin;
  - 4. Handicap;
  - 5. Religion; or
  - 6. Sex
- B. In compliance with the Age Discrimination Act of 1975, no individual shall be denied services or participation or be subjected to discrimination in any of its programs or activities on the basis of age.
- C. In compliance with the Age Discrimination Act of 1975, no individual shall be denied services or participation or be subjected to discrimination in any of its programs or activities on the basis of age.

### **2002 Information Available to the Public**

The items which govern program administration will be maintained in the DES-DAAS office, 1789 W. Jefferson, Phoenix, Arizona 85005 for examination during regular office hours.

- **Short Term Crisis Services (STCS)** – STCS policy manual

### **2003 Confidential Information**

Public law and federal regulations place restrictions on the release of confidential information, and set guidelines for the disclosure of non-confidential materials. All applications, records, files and communications of DES and contractors, relating to specific applicants for assistance and recipients of services funded by DES, are confidential records.

All information, regarding an applicant or recipient, is confidential and may be disclosed only for purposes of determining eligibility, providing services, or investigating suspected fraud in connection with the program. Applicants for services authorize access to their records by signing the application. Anyone not authorized on the application must have the applicant's written approval to access information.

Information that can be exchanged must pertain to the eligibility of the applicant, and excludes items that do not address eligibility, i.e., and personal details. Inappropriate disclosure of information can result in severe disciplinary action, or could result in the suspension of the contract agreement.

Access to information by inappropriate, unauthorized individuals or parties shall be considered a violation of the individual's right to confidentiality. Care should be taken to secure all files in the office so that unauthorized personnel do not have access to them. All records shall be open to any and all federal, state, and contractor auditors and/or examiners in the course of their regular audits.

General information, policy statements, or statistical materials, which cannot be directly identified to any individual or family, are not considered confidential information. They may be given to, or provided by: agencies, helping organizations, or contracted parties, unless restricted by Arizona statutes, federal regulations, or court orders.

When the decision reported is to approve assistance, the approval notice or EN005 application is information only and no further action is required.

When the decision reported is to deny or reduce funded assistance, the reason for such denial must be stated on the intake form, denial letter, or on the EN005 application.